

Screenshot of Plaintiff's Database

CONFIDENTIAL PURSUANT TO COURT ORDER

Neurological History

Family Neuro

Save

Exit

23 Name: _____

Neurological History

1. Headaches: Frequency, location, duration, character, associated symptoms, triggers, treatments, history of headache.

2. Seizures: Type (partial, generalized), frequency, duration, triggers, associated symptoms, treatments.

3. Dizziness: Type (vertigo, lightheadedness), frequency, duration, triggers, associated symptoms.

4. Numbness/tingling: Distribution, frequency, associated symptoms.

5. Weakness: Distribution, frequency, associated symptoms.

6. Vision problems: Blurred vision, double vision, eye pain, associated symptoms.

7. Speech difficulties: Slurred speech, difficulty finding words, associated symptoms.

8. Memory problems: Short-term memory loss, difficulty concentrating, associated symptoms.

9. Mood changes: Depressed mood, anxiety, irritability, associated symptoms.

10. Physical changes: Weight loss/gain, fever, night sweats, associated symptoms.

11. Cognitive changes: Difficulty with memory, concentration, problem-solving, associated symptoms.

12. Behavioral changes: Changes in personality, social withdrawal, associated symptoms.

13. Physical findings: Tremor, atrophy, sensory deficits, reflex changes, associated symptoms.

14. Medical history: History of hypertension, diabetes, heart disease, stroke, seizures, etc.

15. Medications: Current medications, including over-the-counter drugs and supplements.

16. Social history: Smoking, alcohol use, drug use, diet, exercise, stress levels.

17. Family history: History of neurological disorders in family members.

18. Past medical history: Previous hospitalizations, surgeries, injuries, etc.

19. Allergies: Known allergies.

20. Immunizations: Up-to-date immunizations.

21. Travel history: Recent travel, including international travel.

22. Occupational history: Job requirements, exposure to chemicals, physical demands.

23. Hobbies: Hobbies and interests.

24. Diet: Dietary habits, including any dietary restrictions.

25. Exercise: Exercise routine.

26. Stress: Stress levels and coping mechanisms.

27. Sleep: Sleep patterns, including any sleep disorders.

28. Vision: Vision problems, including any eye conditions.

29. Hearing: Hearing problems, including any ear conditions.

30. Skin: Skin problems, including any rashes or changes in skin texture.

31. Hair: Hair loss or changes in hair texture.

32. Nails: Nails problems, including any changes in nail texture or color.

33. Mouth: Mouth problems, including any changes in taste or texture.

34. Gastrointestinal: Gastrointestinal problems, including any changes in bowel habits or appetite.

35. Urinary: Urinary problems, including any changes in urination patterns or frequency.

36. Respiratory: Respiratory problems, including any changes in breathing or coughing.

37. Circulatory: Circulatory problems, including any changes in pulse or blood pressure.

38. Endocrine: Endocrine problems, including any changes in weight, mood, or energy levels.

39. Musculoskeletal: Musculoskeletal problems, including any changes in joint pain or muscle function.

40. Neurological: Neurological problems, including any changes in balance, coordination, or reflexes.

41. Psychiatric: Psychiatric problems, including any changes in mood, behavior, or cognitive function.

42. Other: Any other relevant information.

YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR
Headaches:	SR ↘	Tinnitus:	▼	ChronicBrainInjury:	▼				
MemoryLoss:	SR ↘	Numaness_Tingling:	▼	Fatigue:	▼				
Dementia:	▼	Depression:	▼	MoodSwings:	▼				
Alzheimer's:	▼	NeurologicalDisorder:	▼	PersonalityDisorder:	▼				
ALS:	▼	SuicideThoughts:	▼	PanicDisorder:	▼				
Parkinsons:	▼	BipolarDisorder:	▼	ImpulseDisorder:	▼				
BlurryVision:	▼	PunchDrunk:	▼	Focus_Concentration:	▼				
Irritable_Anxious:	▼	PTSD:	▼	CTE:	▼				
Steedlessness:	▼	AdjustmentDisorder:	▼	Neck_CervicalArthritis:	▼				
Dizziness:	▼	SocialPhobia:	▼	Forgetfulness:	▼				
		Psychosis:	▼	Other:	▼				

A screenshot of the Windows Start screen. The Mail app icon, which is a blue square with a white envelope and a small 'M', is visible. The screen also shows the date as 6/27 PM.